PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)

PTO/SB/22 (10-00) 10/31/2002. OMB 0651-0031

015

DEPARTMENT OF COMMERCE splays a valid OMB control number.	allower)
cket Number (Optional) 5280-368200US	EXT. SING
	155/03
	1201/

	· · · · · · · · · · · · · · · · · · ·				1 ///
	In re Application of Jay A. Berzofsky et al.				12/0
	Application Numbe	09/508,552	Filed Ju	ne 12, 2000	′
,	For MUCOSAL C	CYTOTOXIC T L	YMPHOCY	TE RESPONSES	1
(Group Art Unit 1648	Examiner J. Stucker			
This is a request under the provision reply in the above identified applications.	·	a) to extend the	period for fill	ing a	
The requested extension and appr (check time period desired):	opriate non-small-ent	ity fee are as foll	ows		
One month (37 CFF	R 1.17(a)(1))			\$	
☐ Two months (37 CF	R 1.17(a)(2))			\$	
	FR 1.17(a)(3))			\$930	
☐ Four months (37 C	FR 1.17(a)(4))			\$]
☐ Five months (37 CF	FR 1.17(a)(5))			\$	
Applicant claims small entitive above is reduced by one-had a check in the amount of the payment by credit card. For application to a Deposit Action of the Commissioner has always application to a Deposit Action of the Commissioner is here or credit any overpayment I have enclosed a duplication.	half, and the resulting the fee is enclosed. Form PTO-2038 is attaged been authorized ecount. By authorized to charge, to Deposit Account	fee is: \$. ched. to charge fees i	n this h may be re	equired,	
assignee of record of t	ne entire interest. Se	9 37 CFR 3.71		RECEIV	(ED
Statement under 37 (attorney or agent of rec	CFR 3.73(b) is enclos cord.	ed. (Form PTO/	SB/96).	FEB 1 0 2	003
☐ attorney or agent under 37 CFR 1.34(a).		TECH CENTER 1	รกก/วอกต		
Registration number if a	cting under 37 CFR 1.34(a).	 ·		- OLIVILII	000/2300
WARNING: Information on this be included on this form. Provi					
30 January 2000 Date	3	Thu	Signa	ature	
00000143 201430 09508552		Briar	n W. Poor, F	Reg. No. 32,928	
30.00 CH		7	yped or pri	nted name	
IOTE: Signatures of all the inventors or assigned proms if more than one signature is required, see		erest or their represer	ntative(s) are re	equired. Submit multiple	

Burden Hour Statement: This form is estimated to take 0.1 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

*Total of

forms are submitted.

02/07/2003 CNGUYEN

01 FC:1253